## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUR FEE

Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where

CURRENT CORRESPOND 24239	F	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.  Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.					
MOORE & VA P.O. BOX 1370 Research Triang	. Si						
							(Depositor's name)
•			<u> </u>				(Signature)
							(Date)
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTO	R	ATTOR	NEY DOCKET NO.	CONFIRMATION NO.
10/714,778 TITLE OF INVENTION	11/17/2003 I: STABILIZED FILAM	ENT DRAWING DEVIC	Martin A. Allen CE FOR A MELTSPINN	NG APPARATUS	024	1863-000082	2416
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUI	PREV. PAID ISSU	E FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$0		\$1700	12/26/2007
EXAMINER		ART UNIT	CLASS-SUBCLASS	7			
BODAWALA	A, DIMPLE N	1722	425-072200	_			
"Fee Address" ind PTO/SB/47; Rev 03-6 Number is required.  3. ASSIGNEE NAME A PLEASE NOTE: Unit recordation as set fortical (A) NAME OF ASSIGNATION (A) NAME OF ASSIGNATION (B) PLEASE NOTE: Unit recordation as set fortical (B) NAME OF ASSIGNATION (B) PROPERTY (B) PR	ND RESIDENCE DATA less an assignee is identi h in 37 CFR 3.11. Comp	"Indication form led. Use of a Customer  A TO BE PRINTED ON To iffed below, no assignee letion of this form is NO	data will appear on the T a substitute for filing at (B) RESIDENCE: (CIT	gle firm (having as a agent) and the namorneys or agents. If a printed.  //pe)  patent. If an assigned assignment.	member es of up t no name	a 2ois 3	ocument has been filed for
Please check the appropri	iate assignee category or	categories (will not be pr	rinted on the patent):	Individual 🛎 Co	rporation	or other private grou	up entity Government
Advance Order - #	to small entity discount p	ermitted)	4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)  A check is enclosed.  Payment by credit card. Form PTO 2038-is attacked. Electronic Funds Transfer The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 134365 (enclose an extra copy of this form).				
	s SMALL ENTITY statu	s. See 37 CFR 1.27.	b. Applicant is no lo	nger claiming SMAL	L ENTIT	Y status. See 37 CF.	R 1.27(g)(2).
Authorized Signature	Matthew W.	West 9	Date 21 November 2007  Registration No. 47,183				
This collection of informa an application. Confident submitting the completed this form and/or suggestic Box 1450, Alexandria, Vi Alexandria, Virginia 2231	ation is required by 37 Ciality is governed by 35 application form to the ons for reducing this buringinia 22313-1450. DO	FR 1.311. The information U.S.C. 122 and 37 CFR 1 USPTO. Time will vary den, should be sent to the NOT SEND FEES OR C	in is required to obtain or 1.14. This collection is depending upon the indiction office Chief Information Office COMPLETED FORMS T				by the USPTO to process) gathering, preparing, and e you require to complete trment of Commerce, P.O. or Patents, P.O. Box 1450,

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.